

**FEC FORM 2**  
**STATEMENT OF CANDIDACY**

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FEC MAIL CENTER

1. (a) Name of Candidate (in full) PAUL CHEHADE		2. Identification Number P20002580	
(b) Address (number and street) P. O. BOX 451506		<input type="checkbox"/> Check if address changed	
(c) City, State, and ZIP Code MIAMI, FLORIDA 33245		3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A)	
4. Party Affiliation INDEPENDENT	5. Office Sought PRESIDENT	6. State & District of Candidate	

**DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE**

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2016 election(s).  
(year of election)

**NOTE:** This designation should be filed with the appropriate office listed in the instructions.

(a) Name of Committee (in full) PAUL CHEHADE FOR PRESIDENT
(b) Address (number and street) P.O. BOX 451506
(c) City, State, and ZIP Code MIAMI, FLORIDA 33245

**DESIGNATION OF OTHER AUTHORIZED COMMITTEES**

(Including Joint Fundraising Representatives)

8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

**NOTE:** This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)
(b) Address (number and street)
(c) City, State, and ZIP Code

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Signature of Candidate 	Date 03/21/13
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**NOTE:** Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.

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FEC FORM 2 (REV. 12/2008)



